LEGISLATIVE SERVICES AGENCY OFFICE OF FISCAL AND MANAGEMENT ANALYSIS

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FISCAL IMPACT STATEMENT

LS 7011 NOTE PREPARED: Jan 30, 2007

BILL NUMBER: SB 224

BILL AMENDED:

SUBJECT: Methadone Diversion Control and Oversight Program.

FIRST AUTHOR: Sen. Miller BILL STATUS: As Passed Senate

FIRST SPONSOR: Rep. C. Brown

FUNDS AFFECTED: GENERAL IMPACT: State

X DEDICATED FEDERAL

Summary of Legislation: This bill increases the fee for nonresident methadone clinic patients from \$20 to \$500. The bill specifies uses for the Methadone Diversion Control and Oversight Program Fund. The bill also extends the expiration date for the Methadone Diversion and Control Oversight Program from June 30, 2008, to June 30, 2010.

Effective Date: July 1, 2007.

Explanation of State Expenditures: See *Explanation of State Revenues*.

Explanation of State Revenues: This bill increases the annual fee charged for each nonresident patient treated by a methadone provider during the preceding calendar year from \$20 to \$500. The table below presents information pertaining to the number of persons for which a fee has been collected between 2002 and 2005. The table also includes revenue increases as if the fee required by the bill were in effect during those years. Revenue collected from fees is deposited into the Methadone Diversion Control and Oversight Program Fund.

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Year	Number of Persons for Which a Fee was Charged	Current Revenue (\$20 Fee)	Revenue, As Proposed (\$500 Fee)	Revenue Increase
2002	3,697	\$73,940	\$1,848,500	\$1,774,560
2003	3,951	\$79,020	\$1,975,500	\$1,896,480
2004	4,530	\$90,600	\$2,265,000	\$2,174,400
2005	4,741	\$94,820	\$2,370,500	\$2,275,680

Note: The revenue increase assumes the number of people charged a fee will stay consistent following the fee increase. Should the number of persons paying a fee decrease, actual revenue increases would decrease as well.

The bill allows money in the Fund to be used to:

- (1) support technical assistance to health providers who provide assistance concerning: (a) methadone and other medication-assisted therapy, (b) evidence-based addiction treatment, (c) interventions and treatment of individuals suffering with co-existing disorders of mental illness and substance abuse addiction disorders;
- (2) include methadone providers in the quality review process of reviewing methadone consumer services; and
- (3) provide mental health and addiction prevention and treatment services to consumers.

Currently, money in the fund may be used to carry out the purposes of the Methadone Diversion Control and Oversight Program.

The bill also extends the expiration date of the program from June 30, 2008, to June 30, 2010. The program reports that it should be able to continue operations within its current level or resources. However, it would be unable to increase program output (for example, collection of data) without additional funding. It is assumed that this could be done with the additional fees collected under the bill.

Explanation of Local Expenditures:

Explanation of Local Revenues:

State Agencies Affected: Family and Social Services Administration.

Local Agencies Affected:

Information Sources: John Viernes, Family and Social Services Administration.

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